

**DECLARATION FOR INVENTION OR
DESIGN
PATENT APPLICATION**
(37 CFR 1.63)

Declaration submitted with Initial Filing

Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e) required)

Attorney Docket Number	PC10433A
First Named Inventor	Harold N. Conkle
COMPLETE IF KNOWN	
Application Number	09/701,760
Filing Date	November 30, 2000 (USA) February 25, 2000 (PCT)
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR THE PURIFICATION, RECOVERY, AND SPORULATION OF CYSTS AND OOCYSTS

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 02/25/2000 as PCT International

Application Number PCT/US00/04733 and was amended on
(MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.
60/122,160	2/26/99	<input type="checkbox"/>

COPY

Please type or print sign (+) inside this box → +

DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of my United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number Place Customer Number Bar Code Label here

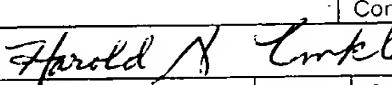
Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Peter C. Richardson	27,526	A. Dean Olson	31,185
Allen J. Spiegel	25,749	Mervin E. Brokke	32,723
Paul H. Ginsburg	28,718	Valerie M. Fedowich	33,688
J. Trevor Lumb	28,567	Bryan C. Zieliński	34,462
James T. Jones	30,561	Robert T. Ronau	36,257
Gregg C. Benson	30,977	B. Timothy Creagan	39,156
Robert F. Sheyka	31,304	Alan L. Koller	37,371
Grover F. Fuller Jr.	31,760	Jolene W. Appleman	35,428
Karen DeBenedictis	32,977	Kristina L. Konstas	37,864
Lorraine B. Ling	35,251	Seth H. Jacobs	32,140
Garth Butterfield	36,997	Martha A. Gammill	31,820
Carl J. Goddard	39,203	Gregory P. Raymer	36,647
Raymond M. Speer	26,810	E. Victor Donahue	35,492
Jennifer A. Kispert	40,049	Roy F. Waldron	42,208
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Adrian G. Looney	41,406	Deborah A. Martin	44,222
A. David Joran	37,858	Jeffrey N. Myers	41,213
Lawrence C. Akers	28,587	Elsa Djuardi	45,963
Gabriel L. Kleiman	40,681	Michelle A. Sherwood	36,271
Donna R. Grossu	P-47,248	Arlene K. Musser	37,895

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:	<input type="checkbox"/> Customer Number or Bar Code Label	OR	<input checked="" type="checkbox"/> Correspondence address below
Name	Paul H. Ginsburg		
Address	Pfizer Inc		
Address	235 East 42nd Street, 20th Floor		
City	New York	State	New York
Country	United States Of America	Telephone	(212)573-2369
		Zip Code	10017-5755
		Fax	(212)573-1939

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle if any)	Family Name or Surname						
Harold N.	Conkle						
Inventor's Signature							
Date 1-4-2001							
Residence: City	Columbus	State	Ohio	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	875 Kenridge Court						
City	Columbus	State	OH	Zip	43220	Country	USA

Additional inventors are being named on the 3 a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → +

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Joseph E.		Schultz						
Inventor's Signature							Date	
Residence: City	Camarillo	State	CA	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address		11675 Barranca Road						
City	Camarillo	State	CA	Zip	93012	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Scott J.		Blonigen						
Inventor's Signature							Date	
Residence: City	Hilliard	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address		3325 River Narrows Road						
City	Hilliard	State	OH	Zip	43026	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Fred H.		Weber						
Inventor's Signature							Date	
Residence: City	Terre Haute	State	IN	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address		159 Phoenix Court						
City	Terre Haute	State	IN	Zip	47803	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
David R.		Kilanowski						
Inventor's Signature							Date	
Residence: City	Dublin	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address		5783 Rushwood Drive						
City	Dublin	State	OH	Zip	43017	Country		

Please type a plus sign (+) inside this box → +

DECLAR N

TIONAL INVENTOR(S)
supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Bruce		Monzyk						
Inventor's Signature							Date	
Residence: City	Delaware	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address 7460 Blaney Road								
City	Delaware	State	OH	Zip	43015	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Timothy M.		Werner						
Inventor's Signature							Date	
Residence: City	Traverse City	State	MI	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address 608 W. 7th Street								
City	Traverse City	State	MI	Zip	49684	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Chad M.		Cucksey						
Inventor's Signature							Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address 1704 West 3rd Avenue								
City	Columbus	State	OH	Zip	43212	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Hamish A. I.		McArthur						
Inventor's Signature							Date	
Residence: City	Mystic	State	CT	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address 202 Library Street								
City	Mystic	State	CT	Zip	06355	Country	USA	

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 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname					
Ted L.			Tewksbury					
Inventor's Signature							Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA	
Post Office Address	1309 Deerlick Drive							
Post Office Address								
City	Columbus	State	OH	Zip	43228	Country	US	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature							Date	
Residence: City		State		Country		Citizenship		
Post Office Address								
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Gregg C. Benson	30,977	B. Timothy Creagan	39,156
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Grover F. Fuller Jr.	31,760	Jolene W. Appleman	35,428
Karen DeBenedictis	32,977	Kristina L. Konstas	37,864
Lorraine B. Ling	35,251	Seth H. Jacobs	32,140
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Raymond M. Speer	26,810	E. Victor Donahue	35,492
Jennifer A. Kispert	40,049	Roy F. Waldron	42,208
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Adrian G. Looney	41,406	Deborah A. Martin	44,222
A. David Joran	37,858	Jeffrey N. Myers	41,213
Lawrence C. Akers	28,587	Elsa Duardi	45,963
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Donna R. Grossu	P-47,248	Arlene K. Musser	37,895

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Name	Paul H. Ginsburg				
Address	Pfizer Inc				
Address	235 East 42nd Street, 20th Floor				
City	New York	State	New York	Zip Code	10017-5755
Country	United States Of America	Telephone	(212)573-2369	Fax	(212)573-1939

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Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

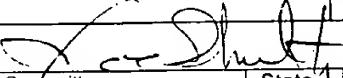
Given Name (first and middle [if any]) Family Name or Surname

Harold N.	Conkle					Date	
Inventor's Signature:							
Residence: City	Columbus	State	Ohio	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	875 Kenridge Court						
City	Columbus	State	OH	Zip	43220	Country	USA

Additional inventors are being named on the 3 a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → +

DECLARATION	IONAL INVENTOR(S) pplemental Sheet
--------------------	---------------------------------------

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Joseph E.		Schultz					
Inventor's Signature							Date 12-30-04
Residence: City	Camarillo	State	CA	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address 11675 Barranca Road							
City	Camarillo	State	CA	Zip	93012	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Scott J.		Blonigen					
Inventor's Signature							Date
Residence: City	Hilliard	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address 3325 River Narrows Road							
City	Hilliard	State	OH	Zip	43026	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Fred H.		Weber					
Inventor's Signature							Date
Residence: City	Terre Haute	State	IN	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address 159 Phoenix Court							
City	Terre Haute	State	IN	Zip	47803	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
David R.		Kilanowski					
Inventor's Signature							Date
Residence: City	Dublin	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address 5783 Rushwood Drive							
City	Dublin	State	OH	Zip	43017	Country	

Please type a plus sign (+) inside this box → +

DECLAR N

ITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Bruce		Monzyk						
Inventor's Signature							Date	
Residence: City	Delaware	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	7460 Blaney Road							
City	Delaware	State	OH	Zip	43015	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Timothy M.		Werner						
Inventor's Signature							Date	
Residence: City	Traverse City	State	MI	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	608 W. 7th Street							
City	Traverse City	State	MI	Zip	49684	Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Chad M.		Cucksey						
Inventor's Signature							Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	1704 West 3rd Avenue							
City	Columbus	State	OH	Zip	43212	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Hannish A. I.		McArthur						
Inventor's Signature							Date	
Residence: City	Mystic	State	CT	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	202 Library Street							
City	Mystic	State	CT	Zip	06355	Country	USA	

Please type a plus sign (+) inside this box → +

DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname					
Ted L.			Tewksbury					
Inventor's Signature						Date		
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA	
Post Office Address		1309 Deerlick Drive						
Post Office Address								
City	Columbus	State	OH	Zip	43228	Country	US	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature						Date		
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		Zip		Country		
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Inventor's Signature						Date		
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
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DECLARATION FOR Utility OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	PC10433A
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Please type a plus sign (+) inside this box → **DECLARATION ---- Utility or Design Patent Application**

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U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number _____

Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Peter C. Richardson	27,526	A. Dean Olson	31,185
Allen J. Spiegel	25,749	Mervin E. Brokke	32,723
Paul H. Ginsburg	28,718	Valerie M. Fedowich	33,688
J. Trevor Lumb	28,567	Bryan C. Zielinski	34,462
James T. Jones	30,561	Robert T. Ronau	36,257
Gregg C. Benson	30,977	B. Timothy Creagan	39,156
Robert F. Sheyka	31,304	Alan L. Koller	37,371
Grover F. Fuller Jr.	31,760	Jolene W. Appleman	35,428
Karen DeBenedictis	32,977	Kristina L. Konstas	37,864
Lorraine B. Ling	35,251	Seth H. Jacobs	32,140
Garth Butterfield	36,997	Martha A. Gammill	31,820
Carl J. Goddard	39,203	Gregory P. Raymer	36,647
Raymond M. Speer	26,810	E. Victor Donahue	35,492
Jennifer A. Kispert	40,049	Roy F. Waldron	42,208
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Adrian G. Looney	41,406	Deborah A. Martin	44,222
A. David Joran	37,858	Jeffrey N. Myers	41,213
Lawrence C. Akers	28,587	Elsa Duardi	45,963
Gabriel L. Kleiman	40,681	Michelle A. Sherwood	36,271
Donna R. Grossu	P-47,248	Arlene K. Musser	37,895

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number _____ or Bar Code Label _____ OR Correspondence address below

Name	Paul H. Ginsburg				
Address	Pfizer Inc				
Address	235 East 42nd Street, 20th Floor				
City	New York	State	New York	Zip Code	10017-5755
Country	United States Of America	Telephone	(212)573-2369	Fax	(212)573-1939

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Family Name or Surname

Harold N.	Conkle	Date					
Inventor's Signature							
Residence: City	Columbus	State	Ohio	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	875 Kenridge Court						
City	Columbus	State	OH	Zip	43220	Country	USA

Additional inventors are being named on the 3 a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box →

DECLARATION

TIONAL INVENTOR(S)
 supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Joseph E.		Schultz						
Inventor's Signature							Date	
Residence: City	Camarillo	State	CA	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	11675 Barranca Road							
City	Camarillo	State	CA	Zip	93012	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Scott J.		Blonigen						
Inventor's Signature	<i>Scott J. Blonigen</i>						Date	
Residence: City	Hilliard	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	3325 River Narrows Road							
City	Hilliard	State	OH	Zip	43026	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Fred H.		Weber						
Inventor's Signature							Date	
Residence: City	Terre Haute	State	IN	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	159 Phoenix Court							
City	Terre Haute	State	IN	Zip	47803	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
David R.		Kilanowski						
Inventor's Signature							Date	
Residence: City	Dublin	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	5783 Rushwood Drive							
City	Dublin	State	OH	Zip	43017	Country		

Please type a plus sign (+) inside this box → +

DECLARATION

ITIONAL INVENTOR(S)
 supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Bruce		Monzyk					
Inventor's Signature						Date	
Residence: City	Delaware	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	7460 Blaney Road						
City	Delaware	State	OH	Zip	43015	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Timothy M.		Werner					
Inventor's Signature						Date	
Residence: City	Traverse City	State	MI	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	608 W. 7th Street						
City	Traverse City	State	MI	Zip	49684	Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Chad M.		Cucksey					
Inventor's Signature						Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	1704 West 3rd Avenue						
City	Columbus	State	OH	Zip	43212	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Hamish A. I.		McArthur					
Inventor's Signature						Date	
Residence: City	Mystic	State	CT	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	202 Library Street						
City	Mystic	State	CT	Zip	06355	Country	USA

Please type a plus sign (+) inside this box → +

DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Ted L.		Tewksbury						
Inventor's Signature							Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA	
Post Office Address		1309 Deerlick Drive						
Post Office Address								
City	Columbus	State	OH	Zip	43228	Country	US	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Inventor's Signature							Date	
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		Zip		Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Inventor's Signature							Date	
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		Zip		Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Inventor's Signature							Date	
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		Zip		Country		

DECLARATION FOR ITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number PC10433A First Named Inventor Harold N. Conkle COMPLETE IF KNOWN Application Number 09/701,760 Filing Date November 30, 2000 (USA) Group Art Unit February 25, 2000 (PCT) Examiner Name Not Yet Assigned Not Yet Assigned	
<input checked="" type="checkbox"/> Declaration submitted with Initial Filing		<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e) required)	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR THE PURIFICATION, RECOVERY, AND SPORULATION OF CYSTS AND OOCYSTS

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) **02/25/2000** as PCT International

Application Number **PCT/US00/04733** and was amended on **(MM/DD/YYYY)** (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.
60/122,160	2/26/99	<input type="checkbox"/>

COPY

DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/026 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number _____ or _____

Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Peter C. Richardson	27,526	A. Dean Olson	31,185
Allen J. Spiegel	25,749	Mervin E. Brokke	32,723
Paul H. Ginsburg	28,718	Valerie M. Fedowich	33,688
J. Trevor Lumb	28,567	Bryan C. Zielinski	34,462
James T. Jones	30,561	Robert T. Ronau	36,257
Gregg C. Benson	30,977	B. Timothy Creagan	39,156
Robert F. Sheyka	31,304	Alan L. Koller	37,371
Grover F. Fuller Jr.	31,760	Jolene W. Appleman	35,428
Karen DeBenedictis	32,977	Kristina L. Konstas	37,864
Lorraine B. Ling	35,251	Seth H. Jacobs	32,140
Garth Butterfield	36,997	Martha A. Gammill	31,820
Carl J. Goddard	39,203	Gregory P. Raymer	36,647
Raymond M. Speer	26,810	E. Victor Donahue	35,492
Jennifer A. Kispert	40,049	Roy F. Waldron	42,208
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Adrian G. Looney	41,406	Deborah A. Martin	44,222
A. David Joran	37,858	Jeffrey N. Myers	41,213
Lawrence C. Akers	28,587	Elsa Duardi	45,963
Gabriel L. Kleiman	40,681	Michelle A. Sherwood	36,271
Donna R. Grossu	P-47,248	Arlene K. Musser	37,895

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:	<input type="checkbox"/> Customer Number or Bar Code Label	OR	<input checked="" type="checkbox"/> Correspondence address below
-------------------------------	--	----	--

Name	Paul H. Ginsburg					
Address	Pfizer Inc					
Address	235 East 42nd Street, 20th Floor					
City	New York	State	New York	Zip Code	10017-5755	
Country	United States Of America	Telephone	(212)573-2369	Fax	(212)573-1939	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name (first and middle if any)	Family Name or Surname					
Harold N.	Conkle					
Inventor's Signature						
Residence: City	Columbus	State	Ohio	Country	USA	Citizenship
Post Office Address						
Post Office Address	875 Kenridge Court					
City	Columbus	State	OH	Zip	43220	Country

Additional inventors are being named on the 3 a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box - +

DECLARATION

OPTIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Joseph E.		Schultz						
Inventor's Signature							Date	
Residence: City	Camarillo	State	CA	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	11675 Barranca Road							
City	Camarillo	State	CA	Zip	93012	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Scott J.		Blonigen						
Inventor's Signature							Date	
Residence: City	Hilliard	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	3325 River Narrows Road							
City	Hilliard	State	OH	Zip	43026	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Fred H.		Weber						
Inventor's Signature	<i>Fred H. Weber</i>						Date	<i>27 DEC 00</i>
Residence: City	Terre Haute	State	IN	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	159 Phoenix Court							
City	Terre Haute	State	IN	Zip	47803	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
David R.		Kilanowski						
Inventor's Signature							Date	
Residence: City	Dublin	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	5783 Rushwood Drive							
City	Dublin	State	OH	Zip	43017	Country		

Please type a plus sign (+) inside this box --

DECLARATION

ITIONAL INVENTOR(S)
 supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Bruce		Monzyk						
Inventor's Signature							Date	
Residence: City	Delaware	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	7460 Blaney Road							
City	Delaware	State	OH	Zip	43015	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Timothy M.		Werner						
Inventor's Signature							Date	
Residence: City	Traverse City	State	MI	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	608 W. 7th Street							
City	Traverse City	State	MI	Zip	49684	Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Chad M.		Cucksey						
Inventor's Signature							Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	1704 West 3rd Avenue							
City	Columbus	State	OH	Zip	43212	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Hamish A. I.		McArthur						
Inventor's Signature							Date	
Residence: City	Mystic	State	CT	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	202 Library Street							
City	Mystic	State	CT	Zip	06355	Country	USA	

Please type a plus sign (+) inside this box →

DECLARATION

ITIONAL INVENTOR(S)
supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname					
Ted L.			Tewksbury					
Inventor's Signature							Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA	
Post Office Address	1309 Deerlick Drive							
Post Office Address								
City	Columbus	State	OH	Zip	43228	Country	US	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature							Date	
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		Zip		Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature							Date	
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		Zip		Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature							Date	
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		Zip		Country		

Please type or sign (+) inside this box → +

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION**
(37 CFR 1.63)

Declaration
Submitted
with Initial
Filing

Declaration
Submitted after Initial
Filing (surcharge
37 CFR 1.16 (e))
required)

Attorney Docket Number	PC10433A
First Named Inventor	Harold N. Conkle
COMPLETE IF KNOWN	
Application Number	09/701,760
Filing Date	November 30, 2000 (USA) February 25, 2000 (PCT)
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR THE PURIFICATION, RECOVERY, AND SPORULATION OF CYSTS AND OOCYSTS

(Title of the Invention)

the specification, of which
 is attached hereto

OR

was filed on (MM/DD/YYYY) 02/25/2000 as PCT International

Application Number PCT/US00/04733 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.
60/122,160	2/26/99	<input type="checkbox"/>

COPY

Please type a plus sign (+) inside this box →

DECLARATION ---- Utility or Design Patent Application

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U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number _____ or _____

Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

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Paul H. Ginsburg	28,718	Valerie M. Fedowich	33,688
J. Trevor Lumb	28,567	Bryan C. Zielinski	34,462
James T. Jones	30,561	Robert T. Ronau	36,257
Gregg C. Benson	30,977	B. Timothy Creagan	39,156
Robert F. Sheyka	31,304	Alan L. Koller	37,371
Grover F. Fuller Jr.	31,760	Jolene W. Appleman	35,428
Karen DeBenedictis	32,977	Kristina L. Konstas	37,864
Lorraine B. Ling	35,251	Seth H. Jacobs	32,140
Garth Butterfield	36,997	Martha A. Gammill	31,820
Carl J. Goddard	39,203	Gregory P. Raymer	36,647
Raymond M. Speer	26,810	E. Victor Donahue	35,492
Jennifer A. Kispert	40,049	Roy F. Waldron	42,208
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Adrian G. Looney	41,406	Deborah A. Martin	44,222
A. David Joran	37,858	Jeffrey N. Myers	41,213
Lawrence C. Akers	28,587	Elsa Duardi	45,963
Gabriel L. Kleiman	40,681	Michelle A. Sherwood	36,271
Donna R. Grossu	P-47,248	Arlene K. Musser	37,895

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:	<input type="checkbox"/> Customer Number or Bar Code Label	<input checked="" type="checkbox"/> Correspondence address below			
Name	Patil H. Ginsburg				
Address	Pfizer Inc				
Address	235 East 42nd Street, 20th Floor				
City	New York	State	New York	Zip Code	10017-5755
Country	United States Of America	Telephone	(212)573-2369	Fax	(212)573-1939

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name (first and middle if any); Family Name or Surname

Harold N. Conkle

Inventor's Signature						Date	
Residence: City	Columbus	State	Ohio	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	875 Kenridge Court						
City	Columbus	State	OH	Zip	43220	Country	USA

Additional inventors are being named on the 3 a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Print or type a plus sign (+) inside this box --

DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Joseph E.		Schultz						
Inventor's Signature							Date	
Residence: City	Camarillo	State	CA	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	11675 Barranca Road							
City	Camarillo	State	CA	Zip	93012	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Scott J.		Blonigen						
Inventor's Signature							Date	
Residence: City	Hilliard	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	3325 River Narrows Road							
City	Hilliard	State	OH	Zip	43026	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Fred H.		Weber						
Inventor's Signature							Date	
Residence: City	Terre Haute	State	IN	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	159 Phoenix Court							
City	Terre Haute	State	IN	Zip	47803	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
David R.		Kilanowski						
Inventor's Signature	<i>David R. Kilanowski</i>						Date	
Residence: City	Dublin	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	5783 Rushwood Drive							
City	Dublin	State	OH	Zip	43017	Country		

Please type a plus sign (+) inside this box -- +

DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Bruce		Monzyk						
Inventor's Signature							Date	
Residence: City	Delaware	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	7460 Blaney Road							
City	Delaware	State	OH	Zip	43015	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Timothy M.		Werner						
Inventor's Signature							Date	
Residence: City	Traverse City	State	MI	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	608 W. 7th Street							
City	Traverse City	State	MI	Zip	49684	Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Chad M.		Cucksey						
Inventor's Signature							Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	1704 West 3rd Avenue							
City	Columbus	State	OH	Zip	43212	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Hamish A. I.		McArthur						
Inventor's Signature							Date	
Residence: City	Mystic	State	CT	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	202 Library Street							
City	Mystic	State	CT	Zip	06355	Country	USA	

Please type a plus sign (+) inside this box →

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Ted L.			Tewksbury				
Inventor's Signature							Date
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA
Post Office Address	1309 Deerlick Drive						
Post Office Address							
City	Columbus	State	OH	Zip	43228	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Inventor's Signature							Date
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Inventor's Signature							Date
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	

Please sign or type inside this box → +

DECLARATION FOR Utility OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	PC10433A
<input checked="" type="checkbox"/> Declaration submitted with Initial Filing		<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e)) required	First Named Inventor Harold N. Conkle <i>COMPLETE IF KNOWN</i>
		Application Number	09/701,760
		Filing Date	November 30, 2000 (USA) February 25, 2000 (PCT)
		Group Art Unit	Not Yet Assigned
		Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR THE PURIFICATION, RECOVERY, AND SPORULATION OF CYSTS AND OOCYSTS

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 02/25/2000 as PCT International

Application Number PCT/US00/04733 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.
60/122,160	2/26/99	<input type="checkbox"/>

COPY

For a fee of \$13.00, file inside this box → +

DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number _____ or _____

Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Peter C. Richardson	27,526	A. Dean Olson	31,185
Allen J. Spiegel	25,749	Mervin E. Brokke	32,723
Paul H. Ginsburg	28,718	Valerie M. Fedowich	33,688
J. Trevor Lumb	28,567	Bryan C. Zielinski	34,462
James T. Jones	30,561	Robert T. Ronau	36,257
Gregg C. Benson	30,977	B. Timothy Creagan	39,156
Robert F. Sheyka	31,304	Alan L. Koller	37,371
Grover F. Fuller Jr.	31,760	Jolene W. Appleman	35,428
Karen DeBenedictis	32,977	Kristina L. Konstas	37,864
Lorraine B. Ling	35,251	Seth H. Jacobs	32,140
Garth Butterfield	36,997	Martha A. Gammill	31,820
Carl J. Goddard	39,203	Gregory P. Raymer	36,647
Raymond M. Speer	26,810	E. Victor Donahue	35,492
Jennifer A. Kispert	40,049	Roy F. Waldron	42,208
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Adrian G. Looney	41,406	Deborah A. Martin	44,222
A. David Joran	37,858	Jeffrey N. Myers	41,213
Lawrence C. Akers	28,587	Elsa Duardi	45,963
Gabriel L. Kleiman	40,681	Michelle A. Sherwood	36,271
Donna R. Grossu	P-47,248	Arlene K. Musser	37,895

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number _____ or Bar Code Label _____ OR Correspondence address below

Name	Paul H. Ginsburg				
Address	Pfizer Inc				
Address	235 East 42nd Street, 20th Floor				
City	New York	State	New York	Zip Code	10017-5755
Country	United States Of America	Telephone	(212)573-2369	Fax	(212)573-1939

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname				
Harold N.		Conkle				
Inventor's Signature						Date
Residence: City	Columbus	State	Ohio	Country	USA	Citizenship
Post Office Address						
Post Office Address	875 Kenridge Court					
City	Columbus	State	OH	Zip	43220	Country
						USA

Additional inventors are being named on the 3 a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

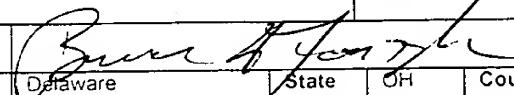
Please type a plus sign (+) inside this box →

DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Joseph E.		Schultz						
Inventor's Signature							Date	
Residence: City	Camarillo	State	CA	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	11675 Barranca Road							
City	Camarillo	State	CA	Zip	93012	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
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Scott J.		Blonigen						
Inventor's Signature							Date	
Residence: City	Hilliard	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	3325 River Narrows Road							
City	Hilliard	State	OH	Zip	43026	Country	USA	
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Given Name (first and middle [if any])		Family Name or Surname						
Fred H.		Weber						
Inventor's Signature							Date	
Residence: City	Terre Haute	State	IN	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	159 Phoenix Court							
City	Terre Haute	State	IN	Zip	47803	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
David R.		Kilanowski						
Inventor's Signature							Date	
Residence: City	Dublin	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	5783 Rushwood Drive							
City	Dublin	State	OH	Zip	43017	Country		

Please type a plus sign (+) inside this box → +

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet					
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Bruce		Monzyk					
Inventor's Signature						Date 12/30/2000	
Residence: City	Delaware	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address		7460 Blaney Road					
City	Delaware	State	OH	Zip	43015	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Timothy M.		Werner					
Inventor's Signature						Date	
Residence: City	Traverse City	State	MI	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address		608 W. 7th Street					
City	Traverse City	State	MI	Zip	49684	Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Chad M.		Cucksey					
Inventor's Signature						Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address		1704 West 3rd Avenue					
City	Columbus	State	OH	Zip	43212	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Hamish A. I.		McArthur					
Inventor's Signature						Date	
Residence: City	Mystic	State	CT	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address		202 Library Street					
City	Mystic	State	CT	Zip	06355	Country	USA

Please type a plus sign (+) inside this box --



DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Ted L.		Tewksbury						
Inventor's Signature							Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA	
Post Office Address	1309 Deerlick Drive							
Post Office Address								
City	Columbus	State	OH	Zip	43228	Country	US	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Inventor's Signature							Date	
Residence: City		State		Country		Citizenship		
Post Office Address								
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City		State		Zip		Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
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Inventor's Signature							Date	
Residence: City		State		Country		Citizenship		
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Given Name (first and middle [if any])		Family Name or Surname						
Inventor's Signature							Date	
Residence: City		State		Country		Citizenship		
Post Office Address								
Post Office Address								
City		State		Zip		Country		

Please type or print inside this box →

DECLARATION FOR Utility OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	PC10433A
<input checked="" type="checkbox"/> Declaration submitted with Initial Filing		First Named Inventor	Harold N. Conkle
<i>COMPLETE IF KNOWN</i>			
		Application Number	09/701,760
		Filing Date	November 30, 2000 (USA) February 25, 2000 (PCT)
		Group Art Unit	Not Yet Assigned
		Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

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(Title of the Invention)

the specification of which
 is attached hereto

OR

was filed on (MM/DD/YYYY) 02/25/2000 as PCT International

Application Number PCT/US00/04733 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.
60/122,160	2/26/99	<input type="checkbox"/>

COPY

Please type a plus sign (+) inside this box → T

DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number
or

Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Peter C. Richardson	27,526	A. Dean Olson	31,185
Aller, J. Spiegel	25,749	Mervin E. Brokke	32,723
Paul H. Ginsburg	28,718	Valerie M. Fedowich	33,688
J. Trevor Lumb	28,567	Bryan C. Zielinski	34,462
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Jennifer A. Kispert	40,049	Roy F. Waldron	42,208
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Adrian G. Looney	41,406	Deborah A. Martin	44,222
A. David Joran	37,858	Jeffrey N. Myers	41,213
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Gabriel L. Kleiman	40,681	Michelle A. Sherwood	36,271
Donna R. Grossu	P-47,248	Arlene K. Musser	37,895

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:	<input type="checkbox"/> Customer Number or Bar Code Label	OR	<input checked="" type="checkbox"/> Correspondence address below
-------------------------------	---	-----------	--

Name	Paul H. Ginsburg				
Address	Pfizer Inc				
Address	235 East 42nd Street, 20th Floor				
City	New York	State	New York	Zip Code	10017-5755
Country	United States Of America	Telephone	(212)573-2369	Fax	(212)573-1939

I hereby declare that all statements made herein, of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
---------------------------------	---

Given Name (first and middle [if any])	Family Name or Surname
--	------------------------

Harold N.	Conkle
-----------	--------

Inventor's Signature		Date	
----------------------	--	------	--

Residence: City	Columbus	State	Ohio	Country	USA	Citizenship	USA
-----------------	----------	-------	------	---------	-----	-------------	-----

Post Office Address	
---------------------	--

Post Office Address	875 Kenridge Court
---------------------	--------------------

City	Columbus	State	OH	Zip	43220	Country	USA
------	----------	-------	----	-----	-------	---------	-----

<input checked="" type="checkbox"/> Additional inventors are being named on the <u>3</u> a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box - +

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet					
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Joseph E.		Schultz					
Inventor's Signature						Date	
Residence: City	Camarillo	State	CA	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	11675 Barranca Road						
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Residence: City	Hilliard	State	OH	Country	USA	Citizenship	USA
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Fred H.		Weber					
Inventor's Signature						Date	
Residence: City	Terre Haute	State	IN	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	159 Phoenix Court						
City	Terre Haute	State	IN	Zip	47803	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
David R.		Kilanowski					
Inventor's Signature						Date	
Residence: City	Dublin	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	5783 Rushwood Drive						
City	Dublin	State	OH	Zip	43017	Country	

Please type a plus sign (+) inside this box → +

DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])		Family Name or Surname							
Bruce		Monzyk							
Inventor's Signature							Date		
Residence: City	Delaware	State	OH	Country	USA	Citizenship	USA		
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])		Family Name or Surname							
Timothy M.		Werner							
Inventor's Signature	<i>Timothy M. Werner</i>						Date	12/29/00	
Residence: City	Traverse City	State	MI	Country	USA	Citizenship	USA		
Post Office Address									
Post Office Address 608 W. 7th Street									
City	Traverse City	State	MI	Zip	49684	Country			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])		Family Name or Surname							
Chad M.		Cucksey							
Inventor's Signature							Date		
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA		
Post Office Address									
Post Office Address 1704 West 3rd Avenue									
City	Columbus	State	OH	Zip	43212	Country	USA		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])		Family Name or Surname							
Hersh A. I.		McArthur							
Inventor's Signature							Date		
Residence: City	Mystic	State	CT	Country	USA	Citizenship	USA		
Post Office Address									
Post Office Address 202 Library Street									
City	Mystic	State	CT	Zip	06355	Country	USA		

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Ted L.

Tewksbury

Inventor's
Signature

Date

Residence: City

Columbus

State

OH

Country

USA

Citizenship

USA

Post Office Address

1309 Deerlick Drive

Post Office Address

City

Columbus

State

OH

Zip

43228

Country

US

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

Zip

Country

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

Zip

Country

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

Zip

Country

DECLARATION FOR INVENTOR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	PCT/US00/04733
		First Named Inventor	Harold N. Conkle
COMPLETE IF KNOWN			
		Application Number	09/701,760
		Filing Date	November 30, 2000 (USA) February 25, 2000 (PCT)
		Group Art Unit	Not Yet Assigned
		Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR THE PURIFICATION, RECOVERY, AND SPORULATION OF CYSTS AND OOCYSTS

(Title of the Invention)

The specification of which
is attached hereto

OR
was filed on (MM/DD/YYYY) 02/25/2000 as PCT International

Application Number PCT/US00/04733 and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.
60/122,100	2/26/99	<input type="checkbox"/>

COPY

DECLARATION ---- Utility or Design Patent Application

I, the undersigned, do hereby declare, under 35 U.S.C. 115, that I am the inventor(s) of the invention described in the specification which is contained in the drawings and, insofar as is applicable, of each of the claims of this application, as set forth below. I declare that I am the original inventor(s) of the subject matter described in the specification which is contained in the drawings and, insofar as is applicable, of each of the claims of this application, except that the following inventor(s), if any, is/are also an inventor(s): _____.

I further declare that I have made a full disclosure of the best mode of carrying out my invention, as required by 35 U.S.C. 115.

I declare that I have not previously filed a utility or design application, or an international PCT application, or a continuation or divisional application, or a continuation-in-part application, or a PCT international application, or the like, in the United States Patent and Trademark Office, or elsewhere, for the same subject matter as contained in the claims of this application, except as set forth below.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT/INTL parent application numbers are listed on a supplemental priority data sheet PTO/SB/025, attached hereto.

I, the undersigned inventor, hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Office in my name:

Customer Number or Bar Code Label	Place Customer Number Bar Code Label here
---	---

Registered practitioner(s), name/registration number listed below

Name	Registration Number	Name	Registration Number
Pete C. Richardson	27,526	A. Dean Olson	31,135
Allen J. Spiegel	25,749	Mervin E. Brokke	32,723
Paul H. Ginsburg	28,718	Vaierie M. Fedowich	33,668
J. Trevor Lumb	28,567	Bryan C. Zielinski	34,462
James T. Jones	30,561	Robert T. Ronau	36,257
Gregg C. Benson	30,977	B. Timothy Creagan	39,156
Robert F. Sheyka	31,304	Alan L. Koller	37,371
Grover F. Fuller Jr.	31,760	Jolene W. Appleman	35,428
Karen DeBenedictis	32,977	Kristina L. Konstas	37,364
Lorraine B. Ling	35,251	Seth H. Jacobs	32,140
Garth Butterfield	36,997	Martha A. Gammill	31,820
Carl J. Goddard	39,203	Gregory P. Raymer	36,547
Raymond M. Spiegel	26,810	E. Victor Donahue	36,493
Jennifer A. Kispert	40,049	Roy F. Waldron	42,206
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Adrian G. Looney	41,406	Deborah A. Martin	44,222
A. David Jeran	37,858	Jeffrey N. Myers	41,213
Lawrence C. Akers	28,587	Elsa Duardi	45,963
Garrison L. Kleinman	40,681	Michelle A. Sherwood	36,271
Donna R. Grossu	P-47,248	Arlene K. Musser	37,895

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto

Direct all correspondence to:	<input type="checkbox"/> Customer Number or Bar Code Label	<input checked="" type="checkbox"/> Correspondence address below
-------------------------------	---	--

Name	Paul H. Ginsburg				
Address	Pfizer Inc				
Address	235 East 42nd Street, 20th Floor				
City	New York	State	New York	Zip Code	10017-5755
Country	United States Of America	Telephone	(212)573-2369	Fax	(212)573-1939

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Cole or First Inventor: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname					
Harold N.		Conkle					
Inventor's Signature						Date	
Residence: City	Columbus	State	Ohio	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	875 Kenridge Court						
City	Columbus	State	OH	Zip	43220	Country	USA

Additional inventors are being named on the 3 or more supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

DECLARATION

ITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Joseph E.		Schultz				
Inventor's Signature		Date				
Residence: City	Camarillo	State	CA	Country	USA	Citizenship
Post Office Address						
Post Office Address	11675 Barranca Road					
City	Camarillo	State	CA	Zip	93012	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Scott J.		Blonigen				
Inventor's Signature		Date				
Residence: City	Hilliard	State	OH	Country	USA	Citizenship
Post Office Address						
Post Office Address	3325 River Narrows Road					
City	Hilliard	State	OH	Zip	43026	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Free -		Weber				
Inventor's Signature		Date				
Residence: City	Terre Haute	State	IN	Country	USA	Citizenship
Post Office Address						
Post Office Address	159 Phoenix Court					
City	Terre Haute	State	IN	Zip	47803	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
David R.		Kilanowski				
Inventor's Signature		Date				
Residence: City	Dublin	State	OH	Country	USA	Citizenship
Post Office Address						
Post Office Address	5783 Ruswood Drive					
City	Dublin	State	OH	Zip	43017	Country

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Bruce		Monzyk					
Inventor's Signature		Date					
Residence: City	Delaware	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	7160 Blaney Road						
City	Delaware	State	OH	Zip	43015	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Timothy M.		Werner					
Inventor's Signature		Date					
Residence: City	Traverse City	State	MI	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	608 W. 7th Street						
City	Traverse City	State	MI	Zip	49684	Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Chad M.		Cucksey					
Inventor's Signature		Date					
Chad M. Cucksey		12/21/2002					
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	1704 West 3rd Avenue						
City	Columbus	State	OH	Zip	43212	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
William A. L.		McArthur					
Inventor's Signature		Date					
William A. L. McArthur							
Residence: City	Mystic	State	CT	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	202 Library Street						
City	Mystic	State	CT	Zip	06355	Country	USA

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
First		Tewksbury				
Inventor's Signature						Date
Residence: City	Columbus	State	OH	Country	USA	Citizenship
Post Office Address	1309 Deerlick Drive					
Post Office Address						
City	Columbus	State	OH	Zip	43228	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City		State		Country		Citizenship
Post Office Address						
Post Office Address						
City		State		Zip		Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City		State		Country		Citizenship
Post Office Address						
Post Office Address						
City		State		Zip		Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City		State		Country		Citizenship
Post Office Address						
Post Office Address						
City		State		Zip		Country

DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)

Declaration submitted with Initial Filing

Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e)) required)

Attorney Docket Number	PC10433A
First Named Inventor	Harold N. Conkle
COMPLETE IF KNOWN	
Application Number	09/701,760
Filing Date	November 30, 2000 (USA) February 25, 2000 (PCT)
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR THE PURIFICATION, RECOVERY, AND SPORULATION OF CYSTS AND OOCYSTS

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 02/25/2000 as PCT International

Application Number PCT/US00/04733 and was amended on (MM/DD/YYYY) [redacted] (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.
60/122,160	2/26/99	<input type="checkbox"/>

COPY

COPY

COPY

Please sign inside this box → +

DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 156, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number _____
 or _____

Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Peter C. Richardson	27,526	A. Dean Olson	31,185
Allen J. Spiegel	25,749	Mervin E. Brokke	32,723
Paul H. Ginsburg	28,718	Valerie M. Fedowich	33,688
J. Trevor Lumb	28,567	Bryan C. Zielinski	34,462
James T. Jones	30,561	Robert T. Ronau	36,257
Gregg C. Benson	30,977	B. Timothy Creagan	39,156
Robert F. Sheyka	31,304	Alan L. Koller	37,371
Grover F. Fuller Jr.	31,760	Jolene W. Appleman	35,428
Karen DeBenedictis	32,977	Kristina L. Konstas	37,864
Lorraine B. Ling	35,251	Seth H. Jacobs	32,140
Garth Butterfield	36,997	Martha A. Gammill	31,820
Carl J. Goddard	39,203	Gregory P. Raymer	36,647
Raymond M. Speer	26,810	E. Victor Donahue	35,492
Jennifer A. Kispert	40,049	Roy F. Waldron	42,208
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Adrian G. Looney	41,406	Deborah A. Martin	44,222
A. David Joran	37,858	Jeffrey N. Myers	41,213
Lawrence C. Akers	28,587	Elsa Duardi	45,963
Gabriel L. Kleiman	40,681	Michelle A. Sherwood	36,271
Donna R. Grossu	P-47,248	Arlene K. Musser	37,895

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: <input type="checkbox"/> Customer Number _____ or Bar Code Label _____	OR <input checked="" type="checkbox"/> Correspondence address below
---	---

Name	Paul H. Ginsburg				
Address	Pfizer Inc				
Address	235 East 42nd Street, 20th Floor				
City	New York	State	New York	Zip Code	10017-5755
Country	United States Of America	Telephone	(212)573-2369	Fax	(212)573-1939

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Harold N.	Conkle

Inventor's Signature						Date	
Residence: City	Columbus	State	Ohio	Country	USA	Citizenship	USA

Post Office Address							
Post Office Address	875 Kenridge Court						

City	Columbus	State	OH	Zip	43220	Country	USA
------	----------	-------	----	-----	-------	---------	-----

Additional inventors are being named on the 3 a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → +

DECLA ON

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Joseph E.			Schultz				
Inventor's Signature							Date
Residence: City	Camarillo	State	CA	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	11675 Barranca Road						
City	Camarillo	State	CA	Zip	93012	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Scott J.			Blonigen				
Inventor's Signature							Date
Residence: City	Hilliard	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	3325 River Narrows Road						
City	Hilliard	State	OH	Zip	43026	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Fred H.			Weber				
Inventor's Signature							Date
Residence: City	Terre Haute	State	IN	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	159 Phoenix Court						
City	Terre Haute	State	IN	Zip	47803	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
David R.			Kilanowski				
Inventor's Signature							Date
Residence: City	Dublin	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address	5783 Rushwood Drive						
City	Dublin	State	OH	Zip	43017	Country	

Please type or sign (+) inside this box -- +

DECLA ON

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Bruce		Monzyk						
Inventor's Signature							Date	
Residence: City	Delaware	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	7460 Blaney Road							
City	Delaware	State	OH	Zip	43015	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Timothy M.		Werner						
Inventor's Signature							Date	
Residence: City	Traverse City	State	MI	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	608 W. 7th Street							
City	Traverse City	State	MI	Zip	49684	Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Chad M.		Cucksey						
Inventor's Signature							Date	
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	1704 West 3rd Avenue							
City	Columbus	State	OH	Zip	43212	Country	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname						
Hamish A. I.		McArthur						
Inventor's Signature							Date	18/01
Residence: City	Mystic	State	CT	Country	USA	Citizenship	USA	
Post Office Address								
Post Office Address	202 Library Street							
City	Mystic	State	CT	Zip	06355	Country	USA	

Please type a plus sign (+) inside this box → +

DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Ted L.		Tewksbury					
Inventor's Signature							Date
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA
Post Office Address	1309 Deerlick Drive						
Post Office Address							
City	Columbus	State	OH	Zip	43228	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature							Date
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature							Date
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature							Date
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	PC10433A
<input checked="" type="checkbox"/> Declaration submitted with Initial Filing	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e) required)	First Named Inventor	Harold N. Conkle
	COMPLETE IF KNOWN		
	Application Number	09/701,760	
	Filing Date	November 30, 2000 (USA) February 25, 2000 (PCT)	
	Group Art Unit	Not Yet Assigned	
	Examiner Name	Not Yet Assigned	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR THE PURIFICATION, RECOVERY, AND SPORULATION OF CYSTS AND OOCYSTS

(Title of the Invention)

the specification of which
 is attached hereto

OR

was filed on (MM/DD/YYYY) 02/25/2000 as PCT International

Application Number PCT/US00/04733 and was amended on
(MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.
60/122,160	2/26/99	<input type="checkbox"/>

COPY

DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 136, which became available between the filing date of the one, and the earliest and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Registered or citizen(s) name/registration number listed below

Register 1 practitioner(s) name/registration numbers listed below			
Name	Registration Number	Name	Registration Number
Peter C. Richardson	27,526	A. Dean Olson	31,185
Allen J. Spiegel	25,749	Mervin E. Brokke	32,723
Paul H. Ginsburg	28,718	Valerie M. Fedowich	33,688
J. Trevor Lumb	28,567	Bryan C. Zielinski	34,462
James T. Jones	30,561	Robert T. Ronau	36,257
Gregg C. Benson	30,977	B. Timothy Creagan	39,156
Robert F. Sheyka	31,304	Alan L. Koller	37,371
Grover F. Fuller Jr.	31,760	Jolene W. Appleman	35,129
Karen DeBenedictis	32,977	Kristina L. Konstas	37,364
Lorraine D. Ling	35,251	Seth H. Jacobs	32,140
Garth Butterfield	36,997	Martha A. Gammill	31,320
Carl J. Goddard	39,203	Gregory P. Raymer	36,647
Raymond M. Speer	26,810	E. Victor Donahue	35,492
Jennifer A. Kispert	40,049	Roy F. Waldron	42,208
Israel Nissenbaum	27,582	Todd M. Crissey	37,807
Adrian G. Looney	41,406	Deborah A. Martin	44,222
A. David Joran	37,858	Jeffrey N. Myers	41,213
Lawrence C. Akers	28,587	Elsa Djuardi	45,963
Gabriel L. Kleiman	40,681	Michelle A. Sherwood	36,271
Donna B. Grossu	P-47,248	Arlene K. Musser	37,895

_____ is the name of the licensed practitioner(s) named on the supplemental Registered Practitioner Information sheet PTO/SB-02C attached hereto.

Direct all correspondence to: Customer Number
or Bar Code Label OR Correspondence address below

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City	New York	State	New York	Zip Code	10017-5755
Country	United States Of America	Telephone	(212)573-2369	Fax	(212)573-1939

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 USC 1001 and that such willful false statements may be used against me in any application or any patent issued thereon.

A petition has been filed for this unsigned inventor.

Family Name or Surname

Given Name (first and middle if any) _____ Grade _____

Harold N. COTTRELL Date

Inventor's Name _____

Signature _____ Date _____ State _____ Ohio _____ Country _____ USA _____ Citizenship _____ USA _____

Residence: City Columbus State Ohio County Scioto

Post Office Address _____

Post Office Address 875 Kenridge Court

Additional inventors are being named on the 3 a supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

GPO:2014-129

PTO/SB/07 (12/05)

Please type a plus sign (+) inside this box → +

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
-------------	--

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Joseph E.		Schultz					
Inventor's Signature							Date
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Post Office Address							
Post Office Address		11675 Barranca Road					
City	Camarillo	State	CA	Zip	93012	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
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Scott J.		Blonigen					
Inventor's Signature							Date
Residence: City	Hilliard	State	OH	Country	USA	Citizenship	USA
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Post Office Address		3325 River Narrows Road					
City	Hilliard	State	OH	Zip	43026	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Fred H.		Weber					
Inventor's Signature							Date
Residence: City	Terre Haute	State	IN	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address		159 Phoenix Court					
City	Terre Haute	State	IN	Zip	47803	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
David R.		Kilanowski					
Inventor's Signature							Date
Residence: City	Dublin	State	OH	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address		5733 Ruswood Drive					
City	Dublin	State	OH	Zip	43017	Country	

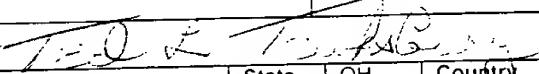
Please type a plus sign (+) inside this box → +

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Bruce		Monzyk					
Inventor's Signature							Date
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Post Office Address							
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Timothy M.		Werner					
Inventor's Signature							Date
Residence: City	Traverse City	State	MI	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address		608 W. 7th Street					
City	Traverse City	State	MI	Zip	49684	Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Chad M.		Cucksey					
Inventor's Signature							Date
Residence: City	Columbus	State	OH	Country	USA	Citizenship	USA
Post Office Address							
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City	Columbus	State	OH	Zip	43212	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Hamish A. I.		McArthur					
Inventor's Signature							Date
Residence: City	Mystic	State	CT	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address		202 Library Street					
City	Mystic	State	CT	Zip	06355	Country	USA

Please type a plus sign (+) inside this box → +

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Ted L.		Tewksbury				
Inventor's Signature						Date 10-29-00
Residence: City	Columbus	State	OH	Country	USA	Citizenship
Post Office Address		1309 Deerlick Drive				
Post Office Address						
City	Columbus	State	OH	Zip	43228	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City		State		Country		Citizenship
Post Office Address						
Post Office Address						
City		State		Zip		Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City		State		Country		Citizenship
Post Office Address						
Post Office Address						
City		State		Zip		Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City		State		Country		Citizenship
Post Office Address						
Post Office Address						
City		State		Zip		Country